10/751431

								Application or Docket Number					
	PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003 247293 USB												
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER SMALL		
TOTAL CLAIMS			5				Γ	RATE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		В	ASIC FE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			5 minus 20=		*			XS 9=		OR	X\$18=		
INDEPENDENT CLAIMS			minus 3 =		*		-	X43=		OR	X86=		
MU	ILTIPLE DEPEN	NDENT CLAIM P	RESENT				ŀ	+145=			+290=		
* If	the difference	in column 1 is	less than zero, enter "0" in column 2			column-2	L	TOTAL		OR		110	
CLAIMS AS AMENDED - PART II								IOIAL	L	OR	TOTAL	1770	
		(Column 1)	ENDEL	(Colum		(Column 3)	olumn 3)		ENTITY	OR	OTHER SMALL I		
AMENDMENT A	11/2/05	CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	* 5	Minus	** A	2	= /		X\$ 9=		OR	X\$18=		
AME	Independent	. 2	Minus	*** 3	S	=		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM '							 +145=	/-	١.,	+290=		
•							Ľ	TOTAL	6	97	TOTAL		
		(Caluma 1)	·	(Calum	O)	(Caluma 2)	AD	DIT. FEE		OR	ADDIT. FEE		
		(Column 1) CLAIMS		(Colum		(Column 3)		•					
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	;	X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***	01.500	=	X43=			OR	X86=		
	PIRST PRESE	NTATION OF MU	LTIPLE DEF	ENDENT	CLAIM			145=		OR	+290=		
							_	TOTAL		I	TOTAL	•	
		(Column 1)		(Calue	nn 2)	(Column 2)	ADI	DIT. FEE		٠,١,	ADDIT. FEE		
- 1	`	(Column 1) CLAIMS		· (Colum		(Column 3)			455	,	1	45	
MEN		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	USLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	** .		= .	>	(\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									UH			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.													
I	the "Highest Nur	nn i is less than thi nber Previously Pai mber Previously Pa	id For IN THIS	S SPACE is	less than	n 20, enter "20."	ADE	TOTAL DIT. FEE	·	OR ,	TOTAL ADDIT. FEE		
		ber Previously Paid					found	in the app	propriate box	in colu	ımn 1,		